Website: www.rahpc.org.rw
Email: info@rahpc.org.rw

Office lines : +250787 700 861
Physical Address: Kimihurura, Rugando 4KG 632 St

RWANDA ALLIED HEALTH PROFESSIONS COUNCIL

CPD BOOKLET

Dates	Names	Course title / subject	N° of credits/ hours	Facilitator	Institution Organizer	Signature of the Participant	Signature of the CPD Provider
From: To:							
From: To:							
From: To:							
From: To:							
From: To:							
From: To:							
From: To:							
From: To:							
From: To:							
From: To:							
From: To:							

Names:	
Profession:	
Cellphone:	

N.B: CPD credits must be signed and stamped by the CPD Provider.

I certify that the information provided above is correct to the best of my knowledge, knowing that incorrect information may result in sanctions.